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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/559,715			ing Date 05/2006	To be Mailed
	Al	PPLICATION	AS FILE	SMALL	ENTITY \square	OR		HER THAN ALL ENTITY				
	FOR	N	NUMBER FILED		NUMBER EXTRA		П	RATE (\$)	FEE (\$)	П	RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1 16(a), (b),	or (c))	N/A		N/A		ı	N/A		1	N/A	
	SEARCH FEE (37 CFR 1 16(k), (i),	or (m))	N/A		N/A			N/A		1	N/A	
	EXAMINATION FE (37 CFR 1 16(a), (p),		N/A		N/A			N/A]	N/A	
	FAL CLAIMS CFR 1.16(i))		minus 20 =				П	x \$ =		OR	x s =	
IND (37	EPENDENT CLAIM CFR 1.16(h))	IS	minus 3 =		•		ı	X \$ =		1	x s =	
٥	APPLICATION SIZE 37 CFR 1.16(s))	FEE shee is \$2 addit	If the specification and di sheets of paper, the applis \$250 (\$125 for small e additional 50 sheets or fr 35 U.S.C. 41(a)(1)(G) and			plication size fee due entity) for each fraction thereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))							П]		
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		1	TOTAL	
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)												ER THAN ALL ENTITY
AMENDMENT	05/16/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16())	* 32	Minus	** 33		= 0	П	x s =		OR	X \$52=	0
	Independent (37 CFR 1.16(h))	• 2	Minus	4		- 0	П	X \$ =		OR	X \$220=	0
	Application Size Fee (37 CFR 1.16(s))											
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
(Column 1) (Column 2) (Column 3)												
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1,16())		Minus			-	П	x s =		OR	x s =	
	Independent (37 CFR 1 16(h))		Minus	***		-	П	X \$ =		OR	X 8 =	
	Application Size Fee (37 CFR 1:16(s))						П]		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))						ı			OR		
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.												

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentially is governed by 39 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application from the USPTO. Time will way depending upon the individual case, Any comments or measured to the very complete including gathering, required to complete this form and/or suggestions for reducing this formation, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Disk 1470, Alexandria, V.S.231-450, D.O. NOT SEND FEES OR LOWNELEET DOTAINS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.